24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	C C00484642
Check if 24-hour report X 48-hour report New report	ort Amends report filed on 10 16 2014
Full Name of Payee Blueprint Interactive	Date of Public Distribution/Dissemination
·	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1155 Connecticut Ave NW	Amount
Ste 601 City State 2	Zip Code 49950.00
1 *	20036-4306 Transaction ID : VN7GB9WQ2A7 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type
Name of Federal Candidate	Support Office Sought: House District:
Joni Ernst	Oppose President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 341	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Bully Pulpit Interactive	10 / 14 / 2014
Mailing Address 1140 Connecticut Ave NW	Amount
Ste 800	
	Zip Code 30000.00 20036-4010 Transaction ID : VN7GB9WQ273 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type
Name of Federal Candidate	Support Office Sought: House District:
Thomas Cotton	Oppose President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	79950.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	>
. , , , , , , , , , , , , , , , , , , ,	reported herein were not made in cooperation, consultation, or concert committee or agent of either, or (if the reporting entity is not a political
	cally Filed] Date 10 17 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	INI EXI END			PAGE 2 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
Senate Majority PAC				C00484642
				000404042
Check if 24-hour report X 48-hour report	New repo	oort X Amends repo	ort filed on 10	
Full Name of Payee Dixon/Davis Media Group LLC				Public Distribution/Dissemination
·			10	
Mailing Address 1028 33rd St NW Ste 300			Amount	
City	State	Zip Code		6745.00
Washington	DC 20007-3571			tion ID : VN7GB9WVP92
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of L	Disbursement or Obligation
Name of Federal Candidate		Cupport	Office Condpt:	Harras Diatriate
Joni Ernst		Support Oppose	Office Sought: President	House District:
Calendar Year-To-Date			Disbursement F	
Per Election for Office Sought	34	416453.26	2014 Othe	er (specify)
Full Name of Payee			Date of !	Public Distribution/Dissemination
Mission Control, Inc.			10	
Mailing Address 114A Mansfield Hollow Rd			Amount	
			7.11104	
City	State	Zip Code	Transacti	30698.45
Mansfield Center	СТ	06250-1316	Date of	ion ID: VN7GB9WX542 Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	M	M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought:	House District:
Joni Ernst		X Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		3416453.26	Disbursement F 2014 Othe	For: Primary
				, (openly)
(a) SUBTOTAL of Itemized Independent Expendit	ures		· •	37443.45
(b) SUBTOTAL of Unitemized Independent Exper	nditures		- - -	
(c) TOTAL Independent Expenditures			· •	7
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	lidate or authorized			
Rebecca Lambe	[Electron	nically Filed] Date		17 2014
Signature		_		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	JENT EXTEND	TIONES	PAGI FOR	E 3 OF 5 SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTI	FICATION NUMBER ▼
Senate Majority PAC			C C0048	34642
Check if 24-hour report X 48-hour report	New rep	port X Amends repo	rt filed on 10 1	6 2014
Full Name of Payee Ourso Beychok Johnson, Inc.			M M / D	
Mailing Address 352 Napoleon St			Amount	4 2014
City	State	Zip Code		18000.00
Baton Rouge	LA	70802-5939	Transaction ID : VN Date of Disburseme	N7GB9WQ249
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	M = M / D	D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought: Ho	use District:
Thomas Cotton		X Oppose	President Se	nate State: AR
Calendar Year-To-Date Per Election for Office Sought	4	026479.61	Disbursement For: I 2014 Other (specify)	Primary X General •
Full Name of Payee Ourso Beychok Johnson, Inc.				ribution/Dissemination
Mailing Address 352 Napoleon St			10 /	2014
332 Napoleon of			Amount	
City	State	Zip Code		24500.00
Baton Rouge	LA	70802-5939	Transaction ID: VN Date of Disbursement	
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	M = M / D	D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought: Ho	use District:
Thomas Cotton		X Oppose	President X Se	nate State: AR
Calendar Year-To-Date Per Election for Office Sought		4026479.61	Disbursement For: 2014 Other (specify)	Primary General
(a) SUBTOTAL of Itemized Independent Exper	nditures		•	42500.00
(b) SUBTOTAL of Unitemized Independent Exp	oenditures			7 7 7
				4
(c) TOTAL Independent Expenditures			>	7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize			
Rebecca Lambe	[Electron	nically Filed] Date	M M / D D /	2014
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	XI ENDITORIES	PAGE 4 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC		C C00484642
Check if 24-hour report X 48-hour report	New report X Amends rep	ort filed on 10 16 2014
Full Name of Payee		Date of Public Distribution/Dissemination
Prism Communications		10 14 2014
Mailing Address 1000 Potomac St NW		Amount
Ste 420 City Sta	to Zin Codo	16531.40
Washington D	'	Transaction ID : VN7GB9WVP50 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate	Category/ Type	Man / Dad / Yayayay
Name of Federal Candidate	Support	Office Sought: House District:
Thomas Cotton	X Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought	4026479.61	Disbursement For: Primary General 2014 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Waterfront Strategies		10 14 2014
Mailing Address 3050 K St NW		Amount
Ste 100		
City Sta Sta	•	71033.00 Transaction ID: VN7GB9WQ281
Purpose of Expenditure Media Buy	Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate	Support	Office Sought: House District:
Thomas Cotton	X Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought	4026479.61	Disbursement For: Primary General 2014 Gther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 87564.40
(b) SUBTOTAL of Unitemized Independent Expenditures		·· •
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its ager	authorized committee or agent	
Rebecca Lambe Signature	[Electronically Filed] Dat	e 10 17 2014
Signaturo		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 5 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	C C00484642
	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New report Amends report	ort filed on 10 16 2014
Full Name of Payee Waterfront Strategies	Date of Public Distribution/Dissemination 10
Mailing Address 3050 K St NW	Amount
Ste 100	Amount
City State Zip Code	50000.00
Washington DC 20007-5108	Transaction ID : VN7GB9WQ299 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District:
Joni Ernst Oppose	President X Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 3416453.26	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	> 297457.85
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent committee) any political party committee or its agent.	
Rebecca Lambe [Electronically Filed] Date	e 10 17 2014
Signature	